

# RECEIVED

## STATE OF SOUTH DAKOTA

### Statement of Legal Newspaper Ownership and Circulation

DEC 28 2022  
SD Secretary of State

|   |  |   |
|---|--|---|
| 1. TITLE OF NEWSPAPER<br><i>Willmott Enterprise</i>   |  | 2. DATE<br><i>9-18-22</i>   |
| 3. FREQUENCY OF ISSUE<br><i>Weekly</i>  | 3A. NO. OF ISSUES PUBLISHED ANNUALLY<br><i>52</i>  | 3B. ANNUAL SUBSCRIPTION PRICE \$ <i>35.00 Total / 40.00 Elec.</i> |
| 4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)<br><i>P.O. Box 6, Willmott, SD 57279</i>   |  |   |
| 5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)<br><i>P.O. Box 6, Willmott, SD 57279</i>  |  |   |
| 6. FULL NAME OF PUBLISHER:<br><i>Terry O'Keefe</i>  |  |   |
| 7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)<br>FULL NAME: <i>Terry O'Keefe</i> COMPLETE MAILING ADDRESS: <i>P.O. Box 6, Willmott, SD 57279</i> |  |   |
| 8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)<br><i>None</i>   |  |   |
| 9. EXTENT AND NATURE OF CIRCULATION   | AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS | ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE                   |
| A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)   | <i>850</i>   | <i>850</i>  |
| B. PAID AND/OR REQUESTED CIRCULATION  |  |   |
| 1. Sales through dealers and carriers, street vendors, and counter sales.   | <i>32</i>  | <i>20</i>   |
| 2. Mail Subscription (Paid and or requested)  | <i>750</i>   | <i>750</i>  |
| 3. Paid Electronic Copies   |  |   |
| C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)   | <i>782</i>   | <i>770</i>  |
| D. FREE DISTRIBUTION  |  |   |
| 1. BY MAIL, CARRIER OR OTHER MEANS  | <i>5</i>   | <i>5</i>  |
| 2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES   |  |   |
| E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)   | <i>787</i>   | <i>775</i>  |
| F. COPIES NOT DISTRIBUTED   |  |   |
| 1. Office use, left over, unaccounted, spoiled after printing   | <i>63</i>  | <i>75</i>   |
| 2. Return from News Agents  |  |   |
| G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)   | <i>850</i>   | <i>850</i>  |

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

*Terry O'Keefe*  
(Signature)

*Owner*  
(Title)

State of South Dakota )  
County of \_\_\_\_\_ )  
(Seal)

Sworn to before me this *19* day of *Sept.*, 20*22*

*Kathy O'Keefe*  
Notary Public

My commission expires: *Sept. 1, 2026*